

POSITION	INITIALS	ID. NO.	DATE
FEE DETERMINATION	KN	70591	10/1/01
O.I.P.E. CLASSIFIER			10/15/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		10/15/01	3800

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/14/01
2	✓	✓	5/14/01
3	✓	✓	5/14/01
4	✓	✓	5/14/01
5	✓	✓	5/14/01
6	✓	✓	5/14/01
7	✓	✓	5/14/01
8	✓	✓	5/14/01
9	✓	✓	5/14/01
10	✓	✓	5/14/01
11	✓	✓	5/14/01
12	✓	✓	5/14/01
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20	✓	✓	5/14/01
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29	✓	✓	5/14/01
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Claim	Final	Original	Date
51	✓	✓	5/14/01
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65	✓	✓	5/14/01
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91	✓	✓	5/14/01
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93	✓	✓	5/14/01
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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